

- 001

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Row 1	Reporter Name	Submission date.	Contact person (if different than reporter)	Internal ID
Administrative Data	Simone Seifert-Higgins	July 29, 2016	Joy Thompson	32358290
	Address Monsanto Company Mail Stop C3NA 800 N Lindbergh Blvd. St. Louis, MO 63167		Address Missouri Regional Poison Center (MRPC) 7980 Clayton Road, Suite 200 St. Louis, MO 63117	
	Phone # (314) 694-1538		Phone # (314) 772-8300	
	Incident Status: New <input checked="" type="checkbox"/> Update <input type="checkbox"/> If update, include date of original submission.	Location and date of incident. (City, County, State) State: Pennsylvania Date: 6/14/2016	Date registrant became aware of incident. July 2016	Was incident part of larger study? Y <input type="checkbox"/> N <input checked="" type="checkbox"/> U <input type="checkbox"/>
Row 2	<u>EPA Registration # (Product 1)</u>	<u>EPA Registration # (Product 2)</u>	<u>EPA Registration # (Product 3 & 4)</u>	
<u>Pesticide(s) Involved</u>	524-445			
	A.I. (s) Glyphosate 41%	A.I. (s)	A.I. (s)	
	Product 1 Name Roundup Herbicide	Product 2 Name	Product 3&4 Name	
	Exposed to concentrate prior to dilution? Y <input type="checkbox"/> N <input type="checkbox"/> U <input checked="" type="checkbox"/> NA	Exposed to concentrate prior to dilution? Y <input type="checkbox"/> N <input type="checkbox"/> U <input type="checkbox"/> NA	Exposed to concentrate prior to dilution? Y <input type="checkbox"/> N <input type="checkbox"/> U <input type="checkbox"/> NA	
	Formulation	Formulation	Formulation	
Row 3	Evidence label directions were not followed? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> U <input type="checkbox"/> Intentional misuse <u>No</u>	Incident site: (examples include home, yard, school, industrial, nursery/greenhouse, surface water, commercial turf, building/office, forest/ woods, agricultural (specify crop) right-of-way (rail, utility, highway). home	Situation (act of using product): (examples include mixing/loading, reentry, application, transportation, repair/ maintenance of application equipment, manufacturing/ formulating). See MRPC incident report (next page)	
Incident Circumstances	Applicator certified PCO? Yes <input type="checkbox"/> No <input type="checkbox"/> U <input checked="" type="checkbox"/>			
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff) See MRPC incident report (next page)	Brief description of incident circumstances. See MRPC incident report (next page)		